

## Adult Sports Opportunities

### Individual Registration

If you are new to the area and would like to enjoy the benefits of adult sports league play, Tempe Parks and Recreation now offers the opportunity to register as an individual. The individual registrations will be used in the attempt to form a team off the individual registration list or will be used for coaches looking for players. There is no guarantee a team will be formed off the individual registration list or a team will pick you up. Names will remain on the list for one season. If you did not get on team you must re-submit a new individual registration form.

To register, fill out the information below and mail, drop off, or fax (480 350-5058) the form below, attn: Adult Sports.

Parks and Recreation office is located on the 2<sup>nd</sup> floor of the Tempe Public Library (3500 S. Rural Rd, Tempe, 85282).

#### Registration Information

☐ I would be interested in forming a team off the individual registration list.

My Primary Athletic interest is:

My Sport(s) of interest is:

☐ Recreational League Play

☐ Competitive League Play

☐ Men's Basketball Leagues

☐ Women's Basketball Leagues

☐ Women's Volleyball Leagues

☐ Co-Rec Volleyball Leagues

☐ Men's Softball Leagues

☐ Co-Rec Softball Leagues

☐ Women's Softball Leagues

☐ Adult Co-Rec Soccer Leagues

☐ Adult Flag Football Leagues

☐ Adult Baseball Leagues

Additional Information: \_\_\_\_\_

#### Individual Adult Sport Registration – Please Print Clearly

Name \_\_\_\_\_ E-mail address \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Age \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile \_\_\_\_\_

#### -- Waiver of Liability --

- With knowledge and appreciation of the risk of injury, I wish to participate in this Activity. I agree to assume the risk of personal injury while participating.
- I understand the City of Tempe does not carry accident, sickness, or medical insurance for participants.
- I understand that all reasonable efforts will be extended to insure my health and safety.
- If the Activity includes any physical exertion, I agree to perform the exercise at my own ability level.
- I fully understand the nature of this Activity, and I waive and release and hold harmless the City of Tempe and any of its agents, employees, officers, council members, and sponsors for any and all rights and claims for damages or costs I may have against the City of Tempe, its agents, employees, officers, council members, and sponsors for personal injury, death, or property damage suffered by me, or that I may cause to others, as a result of my participation in this Activity.
- I agree to look to my private physician for medical advice and care and to notify my teacher or instructor of any physical limitations I might have or modifications I might need to the Activity. I will require the following accommodation to participate: \_\_\_\_\_
- I have read and clearly understand the above statements. I realize this is a contract between myself and the City of Tempe and is a release of Liability. I sign it of my own free will.

REQUIRED: Participant's Signature \_\_\_\_\_

Date \_\_\_\_\_